#### § 162.100

### Subpart P—Health Care Payment and Remittance Advice

162.1601 Health care payment and remittance advice transaction.

162.1602 Standards for health care payment and remittance advice.

### Subpart Q—Health Plan Premium Payments

162.1701 Health plan premium payments transaction.

162.1702 Standard for health plan premium payments.

## Subpart R—Coordination of Benefits

162.1801 Coordination of benefits transaction.

162.1802 Standards for coordination of benefits.

AUTHORITY: Secs. 1171 through 1179 of the Social Security Act (42 U.S.C. 1320d—1320d—8), as added by sec. 262 of Pub. L. 104–191, 10 Stat. 2021–2031, and sec. 264 of Pub. L. 104–191, 110 Stat. 2033–2034 (42 U.S.C. 1320d—2 (note)).

SOURCE: 65 FR 50367, Aug. 17, 2000, unless otherwise noted

# **Subpart A—General Provisions**

## § 162.100 Applicability.

Covered entities (as defined in §160.103 of this subchapter) must comply with the applicable requirements of this part.

### § 162.103 Definitions.

For purposes of this part, the following definitions apply:

Code set means any set of codes used to encode data elements, such as tables of terms, medical concepts, medical diagnostic codes, or medical procedure codes. A code set includes the codes and the descriptors of the codes.

Code set maintaining organization means an organization that creates and maintains the code sets adopted by the Secretary for use in the transactions for which standards are adopted in this part.

Data condition means the rule that describes the circumstances under which a covered entity must use a particular data element or segment.

Data content means all the data elements and code sets inherent to a transaction, and not related to the format of the transaction. Data elements

that are related to the format are not data content.

Data element means the smallest named unit of information in a transaction.

Data set means a semantically meaningful unit of information exchanged between two parties to a transaction.

Descriptor means the text defining a code.

Designated standard maintenance organization (DSMO) means an organization designated by the Secretary under §162.910(a).

Direct data entry means the direct entry of data (for example, using dumb terminals or web browsers) that is immediately transmitted into a health plan's computer.

Electronic media means the mode of electronic transmission. It includes the Internet (wide-open), Extranet (using Internet technology to link a business with information only accessible to collaborating parties), leased lines, dial-up lines, private networks, and those transmissions that are physically moved from one location to another using magnetic tape, disk, or compact disk media.

Format refers to those data elements that provide or control the enveloping or hierarchical structure, or assist in identifying data content of, a transaction.

HCPCS stands for the Health [Care Financing Administration] Common Procedure Coding System.

Maintain or maintenance refers to activities necessary to support the use of a standard adopted by the Secretary, including technical corrections to an implementation specification, and enhancements or expansion of a code set. This term excludes the activities related to the adoption of a new standard or implementation specification, or modification to an adopted standard or implementation specification.

Maximum defined data set means all of the required data elements for a particular standard based on a specific implementation specification.

Segment means a group of related data elements in a transaction.

Standard transaction means a transaction that complies with the applicable standard adopted under this part.